



Economic Impact Analysis Virginia Department of Planning and Budget

12 VAC 5-65 – Regulations Governing Durable Do Not Resuscitate Orders Virginia Department of Health

July 1, 2001

The Department of Planning and Budget (DPB) has analyzed the economic impact of this proposed regulation in accordance with Section 9-6.14:7.1.G of the Administrative Process Act and Executive Order Number 25 (98). Section 9-6.14:7.1.G requires that such economic impact analyses include, but need not be limited to, the projected number of businesses or other entities to whom the regulation would apply, the identity of any localities and types of businesses or other entities particularly affected, the projected number of persons and employment positions to be affected, the projected costs to affected businesses or entities to implement or comply with the regulation, and the impact on the use and value of private property. The analysis presented below represents DPB's best estimate of these economic impacts.

Summary of the Proposed Regulation

The Virginia Department of Health proposes to promulgate permanent regulations to replace emergency regulations that implemented the provisions of Senate Bill 1174 (1999) regarding the creation of a Durable Do Not Resuscitate Order (DDNR). DDNR orders will replace Emergency Medical Services DNR (EMS/DNR) orders that only applied in emergency settings outside of a hospital. The DDNR orders, by contrast, will apply wherever a patient happens to be: in one's home, an emergency vehicle, adult care residence, nursing home, hospital, or elsewhere, and are intended to be honored by physicians and other medical practitioners, in addition to EMS personnel. Significant changes from the past EMS/DNR regulations include the following:

- Addition of new definitions consistent with the *Code of Virginia* to address key terms covered in the regulation, such as DDNR order, informed consent, persons authorized to consent on the patient's behalf, persistent vegetative state, and qualified medical personnel;

- Replacement of the requirement that an "attending physician" must issue DNR orders with new language specifying that a DDNR Order may be issued by "a physician for his patient with whom he has a bona fide physician/patient relationship as defined in the guidelines of the Board of Medicine";
- Removal of the requirement that the patient be diagnosed as terminal in order to initiate a DDNR order;
- Elimination of annual expiration dates, allowing DDNR orders to be valid until revoked by the patient;
- Addition of a provision allowing the issuance of DDNR orders for minors; and
- Authorization of alternate forms of DDNR order identification.¹

Estimated Economic Impact

Do Not Resuscitate orders allow individuals, in advance of emergency situations, to make decisions regarding life-extending treatment and care. The Commonwealth created the EMS/DNR program in the early 1990s in order to provide an official, state-approved form for notifying emergency response personnel of do-not-resuscitate wishes. The proposed changes to this regulation are intended to improve the program by creating a standardized form for use in all health care settings to be honored by all qualified health care providers.

VDH reports that approximately \$21,000 per year was spent for the EMS/DNR order program. This includes the cost of printing forms and staff time devoted to providing information and processing orders of the form.² The proposed changes to the program are expected to increase orders by 35,000 to 40,000 forms annually, resulting in an additional cost of approximately \$1,500 per year.³ Aside from an initial increase in information requests, staff time required for the program is not expected to change.

The DDNR order program will give citizens the ability to choose how they are to be cared for in certain medical situations, regardless of where they occur. This benefits not only the patient, by allowing their desires to be known in cases where they cannot express their own opinion, but also provides clear guidelines for health care providers to follow in emergency

¹ Currently, individuals must carry the DDNR order with them at all times. This document must be viewed by the health care provider prior to withholding any treatment. The alternate forms of identification approved by the Board of Health include identification bracelets and necklaces and will be available from vendors approved by the Department of Health.

² Gary Brown, Director, Office of Emergency Services, Virginia Department of Health.

situations. Savings in medical expenditures associated with the avoidance of unwanted resuscitation efforts are likely to be significant for the health care system, but are, at present, not quantifiable to any reliable degree.

In conclusion, while it is not possible to estimate the monetary value of the benefits expected from the proposed changes to the DNR program, they are likely to outweigh the expected costs.

Table 1: Estimated Economic Impact of the Proposed Changes to 12 VAC 5-65

	Total Annual Costs	Total Annual Benefits	Annual Net Benefit
Implementing and enforcing the changes to the regulations	\$0		
Increase in number of forms requested	(\$1,500)		
Improvement in the program: Standardized form for use in all health care settings Allowing alternative forms of identification Patient's wishes may be more likely to be honored		Not monetarily quantifiable	
Savings from avoidance of unwanted resuscitation efforts		Unknown but possibly very significant	
	(\$1,500)	Not monetarily quantifiable	Unknown but most likely positive

Businesses and Entities Affected

Any individual in the Commonwealth may choose to establish a DDNR order.

Approximately 20,000 forms were completed each year under the EMS/DNR program. VDH expects that number to increase to approximately 60,000 per year under the proposed regulation.

Localities Particularly Affected

No localities are particularly affected by the proposed changes to this regulation.

Projected Impact on Employment

The proposed changes to this regulation are not anticipated to have any effect on employment in Virginia.

³ VDH pays \$.04 for the printing of each form.

Effects on the Use and Value of Private Property

The proposed changes to this regulation are not anticipated to have any effect on the use and value of private property.